EXHIBIT __3

			(FOR AGENCY USE)
Department of Homeland Security	FOI AL COMPLAINT O	F DISCRIMINATI \ SOVERNMENT	(FOR ASERU) (SE)
W. Area	PRIVACY ACT STATEM	MENT (USC 552a)	
AUTHORITY:	Public law 92-261.		
Principle Purpose;	Formal filling of allegation of discrimination because of race, color, religion, sex, national origin age, handlosp, reprisal, or sexual orientation.		
Routine Uses:	This form and the information on this form may be used (a) as a data source for complaint information for production of summary descriptive statistics and analytical studies of complaints processing and resolution efforts and may also be used to respond to general requests for information under the Freedom of Information Act. (b) to respond to requests from legitimate outside individuals or		
	the state of the s	ass, the Whits House, and the Equa e status of the complaint or appeal;	
Disclosure:	Voluntary, however, failure to compount on the basis of inadequate	plete all appropriate portions of this tate data on which to determine if cor	Chaire is acceptable
1. NAME OF COMPLAINANT Ware, Raymond		4. ADDRESS (Include Ch	ty, State and ZIP Code) U 3 AFT, E1212
		HONOLULU, HI. 96837	
2 SSN			
3a. HOME TELEPHONE NO. 908-779-4298	3b. WORK TELEPHONE NO	5c. IF YES, NAME, TELEPHONE AND ADDRESS OF REPRESENTATIVE.	
200-116 4410		Daphne E. Barb 1188 Bishop #1	GUO : GG #7att :
5. ARE YOU BEING REPRES a. YES (complete 5c)	ENTED? b. NO (Skip to item 6a)	Honolulu, HI . 808-533-0275	96813
6a. NAME OF DOT OPERATING ADMINISTRATION YOU BELIEVE DISCRIMINATED AGAINST YOU		7, DATE ON WHICH MOST RECENT ALLEGED DISCRIMINATION OCCURRED 090403	
	THE PROPERTY OF THE PARTY OF TH	8. ARE YOU WORKING FOR T	HE FEDERAL GOVERNMENT?
6b. ADDRESS OF ALLEGED ORGANIZATION (include 4601 FAIR FAX	DISCRIMINATION City, State and ZIP Code) DR., 4# FLOOR		
ARLINGTON VA. 22203		a. YES (Complete items 9, 10 and 11) b. NO (Skip to item 12)	
9. NAME OF AGENCY WHEF	RE YOU ARE CURRENTLY EMPLY	OYED 11a, TITLE OF YOUR OF	CURRENT POSITION
HONOLULU FINTERMATIONAL BIRGORY 10. ADDRESS OF YOUR CURRENT EMPLOYER		11b. GRADE/SERIES	
(include City, State and ZIP Code) 300 ROBERS BLUD: 445 HONOLULU JEH 9682		19 66	
12, REASON YOU BELIEVE Y	OU WERE DISCRIMINATED AGA	UNST (Check below)	
A. RACE (Specify)	→ African-America	F. SEX (Specify)	* ALALE
B. COLOR (Specify)		G. DISABILITY (Specif	
C. RELIGION (Specify)		H. SEXUAL ORIENTA	
D. NATIONAL ORIGIN (S	pecify)	I. REPRISAL (Specify pr I previous I	y filed an EEÓ
E. AGE (Specify Date of Birth mm/di		complaint for promote.	failure to

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13. I HAVE DISCUSSED MY COMPLAINT	13c. IF YES, NAME OF EEO COUNSEL	OR 14. DATE OF FINAL INTERVIEW		
WITH AN EEO COUNSELOR	FARHA GAHUAN	080803		
A. YES (Complete 13c) b. NO	1/1/4/17 493000114	The second secon		
15. EXPLAIN SPECIFICALLY HOW YOU WERE DISCRIMINATED AGAINST (That is, treated differently from other employees or applicants, because of your race, color, religion, sex national origin; age mental or physical handicap, or reprisal). (If your or applicants, because of your race, color, religion, sex national origin; age mental or physical handicap, or reprisal). (If your or applicants, because of your race, color, religion, sex national origin; age mental or physical handicap, or reprisal). (If your or applicants, because of your race, color, religion, sex national origin; age mental or physical handicap, or reprisal). (If your or applicants, because of your race, color, religion, sex national origin; age mental or physical handicap, or reprisal). (If your or applicants, because of your race, color, religion, sex national origin; age mental or physical handicap, or reprisal). (If your or applicants, because of your race, color, religion, sex national origin; age mental or physical handicap, or reprisal). (If your or applicants involves more than one basis for your dissatisfaction list and number each such allegation separately and furnish specific, factual information in support of each). (Use additional sheet(s), if necessary). Allegation No. 1:				
16. LIST IN ITEM 19 THE NAMES OF YOUR WITNESSES AND WHAT FACTUAL INFORMATION EACH WILL BE EXPECTED TO CONTRIBUTE THROUGH HIS/HER TESTIMONY TO THE INVESTIGATION OF YOUR COMPLAINT				
17. WHAT SPECIFIC CORRECTIVE ACTION DO YOU WANT TAKEN ON YOUR COMPLAINT? (If more than one ellegation state overall corrective action desired and the specific corrective action desired for each separate allegation).				
GEE ATTACHED				
	·			
18. HAVE THE MATTERS LISTED IN ITEM 15 BEEN APPEALED TO THE MERIT SYSTEMS PROTECTION BOARD? a. YES (Explain in number item 19) b. No				
		The state of the s		
19. REMARKS				
SEE ATTACHED				
20. SIGNATURE OF COMPLAINANT	21. DATE SIGNED (MM/DD	MYYY)		
Rangal E. Law	090503			
INFORMATION CONCERNING THE F	PROCESSING OF YOUR COMPLAINT OF	DISCRIMINATION		
This form will be used only if you, as a TSA employee or as an applicant for Federal employment, believe you have been treated unfairly because of your race, color, religion, sex, national origin, age, mental or physical disability, reprisal or sexual orientation. If you have questions concerning the completion of this form, you may call the TSA Civil Rights Office at (571) 227-2349.				
Your written, formal complaint must be filed within 15 calendar days of the date of your final interview with the EEO counselor. This time may be extended if you can give a good reason for not submitting the complaint within the 15 calendar day limit.				
If the matter has not been resolved to your satisfaction within 30 calendar days of your first interview with the EEO counselor and the final counseling interview has not been completed within that time, you have the right to file a formal complaint at any				

Department of Transportation, Departmental Office of Civil Rights, 400 7th Street, S.W. Room 2104, Washington, DC 20590, Attention: Caffin Gordon, Chief, Compliance Operations Division (S-34).

Your written formal complaint must be signed, dated and filed in person by you or your attorney or sent by mail to the U.S.

You may have a representative at all stages of the processing of your complaint.

time thereafter up to 15 days after the final interview.

STATEMENT REGARDING EEO COMPLAINT

No 15

I previously filed an EEO complaint for race discrimination at TSA Honolulu International Airport for failure to promote. I contacted and requested EEO counseling June 23, 2003. EEO Counselor Farha M. Rahman discussed my complaint with me by phone twice. Enclosed is a report of our EEO counseling session. Since I have worked at TSA Honolulu International Airport, there have been four opportunities where screening supervisors could be promoted to screening managers. I am qualified. I applied for all vacancies. I was not promoted to any of the vacancies. I am African American. In August 1, 2003, I applied for promotion as screening manager, for 3 more vacancies. Once again, I was not promoted. I called Tom Ward in Washington D.C., TSA recruitment center and was told that I was on the list approved for promotion. However Honolulu TSA Security Director Sidney Hiyakawa did not promote me. I asked Sidney Hiyakawa why I was not promoted on September 4, 2003. He told me he was not involved in the selections for screening managers, however he did approve the promotions. I believe the failure to promote was based upon race and retaliation because I previously filed an EEO complaint. On September 6, 2003 I found out that three screening supervisors were placed in rotation for screening manager. I am not included in this rotation.

No. 17. Corrective Action Requested.

Promotion, Increase in pay, Back Pay, Interest, Compensatory Damages for pain, suffering and mental anguish, punitive damages, costs and attorneys fees.

NO. 19. List of Witnesses

Miligros Drake- she will testify about discrimination at TSA Honolulu.

Cynthia Albert- she will testify about discrimination at TSA Honolulu.

Frederick Morris-he will testify about discrimination at TSA Honolulu.

Jose Abrante-he will testify about discrimination at TSA Honolulu.

Ed Yasana- he will testify about discrimination at TSA Honolulu.

Sidney Hiyakawa- he will testify about working conditions and personel decisions at TSA Honolulu

Ken Kamahele- he will testify about working conditions and personnel decisions at TSA Honolulu Warren Kadakawa -he will testify about working conditions and personnel decisions at TSA Honolulu

Danny Cappo- he will testify about working conditions and personnel decisions at TSA Honolulu Edward Morin- he will testify about working conditions and personnel decisions at TSA Honolulu William Waters- he will testify about working conditions and personnel decisions at TSA Honolulu Honolulu

Leonard Ventura- he will testify about working conditions and personnel decisions at TSA

Charlie Duboyce -he will testify about working conditions and personnel decisions at TSA Honolulu

Alvin Kahalewai- he will testify about working conditions and personnel decisions at TSA

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Luane Nelson- will testify about working conditions and personnel changes. Donn Webb- will testify about working conditions and personnel changes Richard Kadini- will testify about working conditions and personnel changes Bill Foster -will testify about working conditions and personnel changes David Norton -will testify about working conditions and personnel changes Joanna Northcutt- will testify about working conditions and personnel changes Elaine Matsuda -will testify about working conditions and personnel changes Jason Stewart- will testify about working conditions and personnel changes Bill Payne- will testify about working conditions and personnel changes Robin Wong- will testify about working conditions and personnel decisions. EEO Farha Rahman- U.S. Customs-she was supposed to follow up on my EEO complaint. Channey McCarthey- TSA EEO in Washington D.C.- he took my EEO complaint on June 8,2003 Harold Bellamy -Investigator- will testify as to my good character. Dr. Fai Yip-Family physician-will testify as to stress and damages Dr. Sonny Wong-Cardiologist- will testify as to stress and damages. Ching Chu Ware- she will testify about the stress Complainant has suffered.

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